MENTAL HEALTH AND DISABILITY SERVICES COMMISSION

April 19, 2012, 9:30 am to 3:00 pm Altoona Public Library 700 8th Street S.W., Altoona, IA MEETING MINUTES

MHDS COMMISSION MEMBERS PRESENT:

Neil Broderick
Lynn Crannell
Lynn Grobe
Jan Heikes
David Hudson
Cindy Kaestner

Gary Lippe
Zvia McCormick
Susan Koch-Seehase
Gano Whetstone
Jack Willey
Craig Wood

MHDS COMMISSION MEMBERS ABSENT:

Senator Merlin Bartz
Richard Crouch
Chris Hoffman
Chris Hoffman
Linda Langston
Representative Dave Heaton
Representative Lisa Heddens
Chris Hoffman
Linda Langston
Laurel Phipps
Dale Todd

OTHER ATTENDEES:

Theresa Armstrong DHS, MHDS, Community Services & Planning U of Iowa, Center for Disabilities & Development

David Basler ChildServe

Ronda Bennett Iowa Department of Inspections and Appeals
Teresa Bomhoff Iowa Mental Health Planning & Advisory Council

Eileen Creager Aging Resources of Central Iowa
Diane Diamond DHS, Targeted Case Management

Connie Fanselow DHS, MHDS, Community Services & Planning

Gretchen Kraemer Attornev General's Office

Liz O'Hara U of Iowa, Center for Disabilities & Development

Natasha Retz

Brain Injury Association of Iowa
Joe Sample

Iowa Department on Aging

Deb Schildroth Story County Community Services

Deb Eckerman Slack ISAC County Case Management Services

Heidi Smith Lutheran Services in Iowa

Casey Westhoff The Arc of Iowa

WELCOME AND CALL TO ORDER

Chair Jack Willey called the meeting to order at 9:40 a.m. Quorum was established. Jack led introductions of Commission members and guests. No conflicts of interest were declared for this meeting.

APPROVAL OF MINUTES

Jan Heikes made a motion to approve the minutes of the March 15, 2012 meeting as presented. Lynn Crannell seconded the motion. The motion passed unanimously.

MHDS UPDATE

Theresa Armstrong presented an update on MHDS activities. Rick Shults sent his apologies; he had planned to attend the meeting, but the Redesign bill has been scheduled to be debated this morning and he needs to be available to answer questions.

<u>Emergency Disaster Grant</u> – Iowa has received an emergency disaster grant from FEMA (Federal Emergency Management Agency) for the western Iowa counties that suffered from flooding last summer. The grant applies to Fremont, Harrison, Mills, Monona, and Pottawattamie Counties and will provide on-going mental health support and assistance to people who have been affected in those areas.

As a result of the tornadoes over the weekend, Union County has asked DBHRT (the Disaster Behavioral Health Response Team) to be on standby. The town of Thurman is in Fremont County, which is one of the counties covered under the FEMA grant, so the people who are already on site there will be reaching out to the families affected by the tornado. The grant is for about \$470,000 and will last until October. The funds come to DHS and are distributed to community mental health centers (CMHCs) that use it to hire disaster-trained staff to go out into communities and do the outreach. ISU (lowa State University) also has the lowa Concern Hotline, which is a resource anyone in the state can call who is looking for assistance. The hotline is also supported by grant funds.

Employment – Iowa has contracted with the State Employment Leadership Network (SELN), which is associated with NASDDDS (National Association of State Directors of Developmental Disability Services) to facilitate work on getting more people in our state into competitive employment. Meetings began this month to talk about outcomes and rate structures that will support the preferred employment outcomes. About 40 people attended the first outcomes meeting; the attendees included providers, IVRS (Iowa Vocational Rehabilitation Services), the Iowa DD Council, CDD (Center for Disabilities and Development), MHDS, IME (Iowa Medicaid Enterprise), IWD (Iowa Workforce Development), and the Iowa Department for the Blind. The group has determined that one desired outcome is to increase the number of people competitively employed. They are now focusing on the variables in what that means, including work status, number of hours, and amount of wages. They will be looking at those things across all types of

employment and self-employment. Rate structuring is a more complicated issue and will require more time and work. The group will start by studying what providers need, what obstacles exist, and what policies need to be reviewed.

The Iowa DD (Developmental Disabilities) Council is administering another grant they received, called the Iowa Coalition for Integrated Employment (ICIE). They are working with the Department of Education to get training to youth that will better prepare them for employment and develop support for the idea that competitive employment will be the expectation for youth with disbilities.

lowa Vocational Rehabilitation Services (IVRS) also has an Employment First grant, which is focused on changing state and federal policies to better support competitive employment. The State of Washington is serving as a mentor state to lowa because they have been a leader in making significant gains in employment for people with disabilities.

<u>Family Support 360</u> – New navigators have been trained and peers who were already working as family navigators received additional training and they are helping families get through the system. The grant will be over at the end of September. This is sooner than we expected, but the funding for all states was cut at the federal level and we are now focused on how to sustain the work that has been done and to support coordination and training for the navigators who will continue to engage in family support work through their various agencies and organizations.

<u>BIPP</u> – The Balancing Incentives Payment Program (BIPP) application is ready for Rick Shults and Jennifer Vermeer to review and it is expected to be filed by the end of the month. Iowa could then be approved by CMS to start the program on July 1. So far two other states have been approved and several others have submitted their applications. Theresa said we intend to meet the federal expectations for conflict free case management with some relatively minor changes to the system we have and will be putting a new assessment process in place and exploring ways to implement a "no wrong door/single entry point" for statewide access. She noted that from reviewing the first approved application, we learned that we can get approved even though we still have things to work on.

MHDS REDESIGN UPDATE

Senate File 2315 is now in the House and they are working on some amendments. The policy side of the bill is strong and the House is working with the Senate on the changes they want. It is more challenging to reach consensus on the financial aspects of the bill. It has been described as trying to find the right puzzle pieces that fit together to support the system.

 Individual counties can request a waiver from joining a region if them meet certain criteria

- The timeline still calls for the system is to be in place by July 2014, but now starts the process about 6 months later
- More streamlined reporting for the regions
- Focus on making sure subacute services are both facility and community based and Medicaid reimbursable
- Subacute is now limited to 50 beds statewide until the costs and the level of need are identified
- There is an expedited administrative review for health and safety issues with a 2to-5 day timeline
- The expedited appeals process goes through the MHDS administrator
- There are still a series of workgroups in the bill, including Outcomes, Transition Funding, Judicial, and Children's Services
- The Children's Workgroup has been given more direction
- Core services are listed in the bill and some still need to be defined
- There is every intent that property tax will be put back into the bill and an equalization cap has been proposed but it is not yet clear exactly how that would work
- One of the amendments to the Redesign bill added a crisis pilot project

Theresa added that while it is not specified in the bill, the Brain Injury Workgroup wants to continue the work it started last year under Senate File 525 last year and DHS may also utilize input from the group.

Susan Koch-Seehase commented that there has been discussion of IME using the Mayo-Portland Adaptability Inventory (MPAI) as an assessment tool for brain injury. Natasha Retz added that next Wednesday there is a meeting scheduled to learn more about the MPAI assessment. Jan Heikes said the use of a consistent assessment and the collection of data will help establish the need for services. The Commission asked to schedule an update on brain injury for an upcoming meeting.

Craig Wood commented that he thinks the Judicial Workgroup needs to address the lack of clarity in the Code about who is responsible for finding beds for individuals who have had a petition signed for commitment. He said he thinks CPCs are often doing it when the clerks of court should be responsible. Since commitments are a legal procedure, not a mental health service, that should be clarified.

Teresa Bomhoff asked if there was a proposed increase in nursing home funding. Theresa Armstrong responded that the nursing home appropriation is reviewed regularly and \$11 million increases are routinely made. She noted that increase was taken into account in the budget numbers for the BIPP application.

The House has proposed \$41.4 million to address the shortfall for 2013. The plan is now for the State to buy out county participation in Medicaid at 100% this coming July. That amount would be about \$41 million. It appears the intent is that property tax will be reinstated. The fiscal year 2013 levy is already set. There has also been discussion of an additional transition fund for 2013, but no amounts have been set yet. Craig Wood

said he does not see where the difference between the \$125 million that has come from county property taxes and the \$156 million counties have been spending on non-Medicaid services will come from. Theresa Armstrong said the Democrats in the House are working on an amendment to address funding.

COMMISSION LETTER

At the last Commission meeting a vote was taken to send a letter to editors of the seven largest papers in lowa outlining the funding crisis some counties are facing. Jack Willey worked with Connie Fanselow to create a draft and the draft was discussed with Rick Shults and Theresa Armstrong, but it was not sent. Jack read the draft letter to the Commission. Jack indicated that concerns were raised about presenting the issue in a balanced and constructive way. He said it also became clear that the message of the dire budgetary situation that certain counties faced had reached legislators, but that knowledge of the situation had not been effective in producing a commitment to additional funding and that it was difficult to know how to effectively impact decision-making. Craig Wood commented that he was disappointed the letter had not been sent. Neil Broderick commented that if an issue arose, it should have been brought back to the Commission to make that determination. David Hudson said he wants the Commission to have a strategic role and a public voice.

RECOGNITION OF COMMISSION MEMBERS

The Commission recognized the service of four members whose terms are ending this month: Jan Heikes, Cindy Kaestner, Linda Langston, and Craig Wood. Jack Willey presented them will certificates of appreciation and spoke on behalf of the Commission: "Your contributions have been immeasurable. Everyone will miss your input, your knowledge about lowa mental health and disability services, and your hard work. We applaud you for the many hours you have given up to participate on the Commission. Thank you for what you have done and please continue to share your input with us."

Jan Heikes said, "I really enjoyed her time on the Commission and it has been an incredible learning experience."

Cindy Kaestner said, "No one does this work unless they have a passion for it. Sometimes it takes many years to see progress, but there is progress being made. We are right one the edge of seeing some monumental change with redesign in lowa and national health care reform; integrating mental health services with health care services will be a very good thing for everyone."

Craig Wood said, "I want you to realize how important this body is – the first time I did a presentation before the Commission, my knees shook. I hope you will continue the job you have been doing. All the providers I have ever worked with are very consumercentered. It is important to have providers and consumers at the table and to have good relationships in place."

A break for lunch was taken at 11:35 a.m.

The meeting resumed at 12:45 p.m.

NOMINATION OF OFFICERS

Jan Heikes and Gano Whetstone were appointed to serve as a nominating committee to bring forward candidates for election of chair and vice-chair in May. Jan reported for the committee by making a motion to nominate Jack Willey to another term as Chair, and Susan Koch-Seehase for Vice-Chair. Lynn Crannell seconded the motion. The motion passed unanimously. Officers will be elected at the May 17 meeting.

COMMISSION DUTIES RE: REDESIGN

Connie Fanselow shared a preliminary discussion draft of changes to Commission duties proposed in the MHDS Redesign bill, Senate File 2315. Jack Willey said he hopes to plan to set up some committees to start work at the May meeting on how to handle the new responsibilities. A final bill is expected then. The Commission members were asked to review the discussion draft, thinking about process, particular areas of interest, and additional information they would like to have provided. They took a short recess to read and review the outlined provisions.

<u>Discussion</u>: Theresa Armstrong and Jack Willey lead the discussion.

Theresa indicated that the Commission will be working closely with Rick Shults and Chuck Palmer in the regional formation process, which calls for new rules and policies to be created and others to be adapted from the county system. She noted that they may be seeing more of Director Palmer as the process moves forward.

If there are any issues that would lead the Director to decide not to approve a regional plan, the process is expected to be very similar to what happens now with county management plans. If there is something problematic to adverse to consumers, that is brought to the Commission to review.

Theresa said that the members for the Outcomes and Performance Measures Workgroup have not been named yet. Volunteers will be considered. Membership for the workgroups will be based on the same kinds of things considered last year for the redesign workgroups. Cindy Kaestner noted that she is on the Data Integration Workgroup and they are just getting started.

Administrative rules would be developed by the Department and the Commission would be involved during the development as well as voting on final approval. This is meant to be collaborative with DHS and the intent is to have a good partnership between the Department and the Commission. Theresa said DHS will be bringing products to the Commission before they are finished because the review and input of Commission members will be an important part of the process.

Craig Wood suggested forming committees to address:

- Funding (data, core services, outcomes)
- Regional system plans
- Statewide eligibility (financial and clinical eligibility, functional assessment)
- Community mental health centers

Committees could meet in between monthly meetings if necessary to take a more indepth look at the data and information being discussed. They would need a Department staff person at the committee meetings. It was also noted that for a while the Commission set aside the first part of each meeting for committee work and that could be done again. Others have also been invited to participate on committees with Commission members when they could bring particular expertise to the discussion. It was also suggested that it would be helpful to have a Commission member on each of the DHS workgroups who could report to the Commission on the workgroup activities and take Commission feedback to meetings. Jack Willey commented that Commission membership on last year's workgroups was invaluable.

The workgroups identified in the pending Redesign legislation are:

- Data Systems
- Outcomes and Performance Measures
- Children's Services
- Transition Funding (from a county system to a regional system)
- Judicial
- Workforce (organized and staffed by the Department of Public Health)

Susan Seehase commented that it will be important for community services to pay close attention to the Workforce group. Cindy Kaestner said that in addition to those workgroups, the Department will probably be putting together a group to develop new community mental health center (CMHC) accreditation standards and it would be helpful to have Patrick Schmitz involved in that effort. CMHC standards exist but need to be rewritten because Chapter 230A has changed and the standards need to change in response. Adopting CMHC standards is one of the responsibilities given to the Commission under the Redesign bill.

Gary Lippe said the Commission needs to have a conversation with Rick Shults about how he sees these things developing and what role he sees the Commission having in the larger structure. The Department and Commission work plans need to fit together. Zvia McCormick suggested that committees could concentrate on specific areas and give input to particular workgroups or to the Department as they are in the process of developing reports or rules.

Neil Broderick said the Department and the Commission need to determine how members can participate in the formulation steps in a meaningful way. We want to participate and give input along the way in helping to develop a product, not just be presented with the end product for our approval. David Hudson said that he thinks the Commission can help steer without being part of the workgroup if they are given a chance to review progress as it develops.

Jack Willey said he is concerned that things can move very quickly and the Commission may need to set up conference calls and use email to provide information and feedback in a timely manner. It may not be reasonable to always do that at a once-a-month meeting. Gary Lippe said that he believe the Commission can have a much stronger influence but it will take more time and commitment and it will be necessary to be involved throughout the process.

PLANNING FOR MAY MEETING

A joint meeting with the Iowa Mental Health Planning and Advisory Council is planned for Wednesday afternoon, May 16, which is the Planning Council's usual meeting day. Both groups would like a presentation on the legislative session, with special emphasis on a summary of the redesign bill and funding, which is likely to be final by then. The legislative members of the Commission and those key to the Redesign effort will be invited to attend and share their perspectives.

Other suggestions:

- A presentation on Brain Injury to be scheduled for May or June
- Report on the progress in the development of DHS workgroups and workgroup membership
- Discussion of how to build a strategic partnership between the two groups and how to work together as an engine of change
- Review of the Olmstead Plan and progress
- Identification of public policy goals and the beginning of a strategic plan to move them forward

PUBLIC COMMENT

Bob Bacon commented that DHS is still charged with coordinated planning with other state agencies, which aligns with the Olmstead Plan and there are some things that cannot be done by DHS alone. Last week it was announced that at the federal level within the Department of Health and Human Services, a new Administration on Community Living has been established that brings together the Administration on Aging, the Office on Disability and the Administration on Developmental Disabilities into a single federal agency. It is very exciting to have the mission of community living imbedded in the name of the agency. It is also a sign of the movement toward looking at long term services and supports as they relate to people with disabilities, mental illness, and aging together.

The meeting was adjourned at 2:10 p.m.

Minutes respectfully submitted by Connie B. Fanselow.